



**CIT NAME** \_\_\_\_\_ **AGE** \_\_\_\_\_ **Circle: BOY GIRL**

2 week minimum required for advancement. Week 4 mini-camp does not fulfill the week enrollment requirement. CITs may apply for more than two weeks, if desired. We will do our best to confirm your first choice weeks. We will notify you as soon as possible regarding your confirmed weeks; Level 3-4 additional weeks and specific hourly assignment may not be confirmed until closer to camp start. Please note the CIT camp day may begin before 9:00 am and/or extend to 5 pm, as per assignment.

Check enrollment option:

1 <sup>st</sup> choice	2 <sup>nd</sup> choice		1st	2nd	
_____	_____	Week 1 June 11-15	_____	_____	Week 5 July 9-13
_____	_____	Week 2 June 18-22	_____	_____	Week 6 July 16-20
_____	_____	Week 3 June 25-29	_____	_____	Week 7 July 23-2
_____	_____	Week 4 July 2-3 Mini camp	_____	_____	Week 8 July 30-Aug 3

**PARENTAL/GUARDIAN AGREEMENT**

Recognizing that Footfire Summer Soccer Camps, a Playing Life Academy program, will do its best to ensure a safe experience, I understand, agree and acknowledge that some activities may be of a hazardous nature and/or include physical and/or strenuous activity and that soccer training may include physical contact.

I understand that I am required to disclose an officially diagnosed special need and/or any disruptive behavioral issue of my son/daughter, hereafter referred to as "the CIT (Counselor-In-Training) listed in this form". Such disclosure is necessary for the well-being and safety of the CIT listed in this form and that of all Footfire Summer Soccer Camp participants. I recognize that failure to disclose such may adversely affect the participation of the CIT listed in this form. Understanding this, I state to the best of my knowledge that the CIT listed in this form has no medical conditions or behavioral issues that would hinder his/her active participation in Footfire Summer Soccer Camps.

In the case of injury, I authorize the Staff of Footfire Summer Soccer Camps to render first aid and/or obtain whatever medical treatment he/she deems necessary for the welfare of the CIT listed in this form. I further understand and agree that I will be financially responsible for all charges and fees incurred in the rendering of said treatment, regardless of whether my insurance would cover such charges and fees.

I understand that Footfire Summer Soccer Camps reserves the right to cancel camp in the event of an emergency, such as a natural disaster, and/or the camp site becomes inaccessible for use, and that Footfire Summer Soccer Camp Staff will contact me as soon as is feasible with pertinent information. I understand the cancellation of camp may require early pick-up of the CIT listed in this form.

I understand and agree I am assuming full and voluntary responsibility and knowingly assume all such risks entailed by emergencies, natural disasters, death or personal injury, property loss, or damage suffered by the CIT listed in this form.

Knowing this and by signing this Parental/Guardian Consent Agreement Form, I am agreeing to release, indemnify and hold Footfire Summer Soccer Camps, Playing Life Academy, and Staff harmless forever from any and all liability costs, including attorney fees, associated with or arising from the participation of the CIT listed in this form in Footfire Summer Soccer Camps.

I understand, and give my consent for images (photos, video footage, etc.) of the CIT listed in this form at Footfire Summer Soccer Camps to be used for promotional purposes in the future.

I am the parent or legal guardian of the CIT listed in this form. I have read, understood, and agree to the terms and conditions of this form, and understand that I am giving up substantial rights including my right to sue. I acknowledge I am signing this Agreement freely and voluntarily, and intend by my signature a complete and unconditional release of all liability to the greatest extent allowed by law.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PARENTAL/GUARDIAN AGREEMENT, Section 2**

\* Please initial the appropriate option and sign below.

\_\_\_\_\_ The CIT, a minor, listed in the above form has my permission to sign-out and leave camp on his/her own. It is the responsibility of the CIT to inform the Camp Director at the time of sign-out.

\_\_\_\_\_ The CIT, a minor, listed in the above form DOES NOT have my permission to sign-out on his/her own. He/she must be signed out by a responsible adult, either a parent/guardian or an adult I designate for emergency/pick-up.

\_\_\_\_\_ Applies to CIT Levels 3 and 4 only. The CIT listed in the above form above has my permission to be transported by Footfire Staff in designated, insured Footfire vehicles when engaged in Footfire activities between the Footfire site, Codornices Park, Berkeley and off-site office/kitchen location, 1645 4<sup>th</sup> Street, Berkeley. In giving my permission I understand that I give my unconditional release of all liability and waive the right to sue Playing Life Academy, Footfire Soccer and its Staff.

\_\_\_\_\_ Applies to CIT Levels 3 and 4 only. I understand that CIT participation may include participation at both Codornices Park (on site) and the off-site office/kitchen location, 1645 4<sup>th</sup> Street, Berkeley.

\_\_\_\_\_ Applies to CIT Levels 3 and 4 only. The CIT listed in the form above has my permission to sign-out and leave the off-site office/kitchen location, 1645 4<sup>th</sup> Street, Berkeley, on his/her own. It is his/her responsibility to notify the adult supervisor at the time of sign-out.

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Signature

Date